

PART B - FEE(S) TRANSMITTAL

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7590 10/18/2007

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11/02/2007 FMETEK12 00000084 10779422

01 FC:1501	1440.00 OP	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
02 FEE1504	1440.00 OP			
03 FC:8001	30.00 OP	Robert H. Wollenberg	T-6318 (538-68)	9056
10/779,422 02/13/2004				

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Bridget Griffin (Depositor's name)

Bridget Griffin (Signature)

October 30, 2007 (Date)

TITLE OF INVENTION: HIGH THROUGHPUT SCREENING METHODS FOR LUBRICATING OIL COMPOSITIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	01/18/2008
EXAMINER	ART UNIT		CLASS-SUBCLASS			
WALLENHORST, MAUREEN	1797		436-060000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Claude J. Caroli
2 M. Carmen & Associates, PLLC
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chevron Oronite Company LLC

San Ramon, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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A check is enclosed.
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3591 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael E. Carmen

Date October 30, 2007

Typed or printed name Michael E. Carmen

Registration No. 43,533

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